

Application Data Sheet**Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: CELL CULTURE INSERT
Attorney Docket Number:: WEDELL1
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Gabriele
Middle Name::

Family Name::	WEDELL		
Name Suffix::			
City of Residence::	Goppeln		
State or Province of Residence::			
Country of Residence::	Germany		
Street of Mailing Address::	Gebergrundblick 46		
City of Mailing Address::	Goppeln		
State or Province of Mailing Address::			
Country of Mailing Address::	Germany		
Postal or Zip Code of Mailing Address::	01728		
Applicant Authority Type::	Inventor		
Primary Citizenship Country::	Germany		
Status::	Full Capacity		
Given Name::	Helmut		
Middle Name::			
Family Name::	MATTHES		
Name Suffix::			
City of Residence::	Grosserkmannsdorf		
State or Province of Residence::			
Country of Residence::	Germany		
Street of Mailing Address::	Bautzner Landstrasse 39		
City of Mailing Address::	Grosserkmannsdorf		
State or Province of Mailing Address::			
Country of Mailing Address::	Germany		
Postal or Zip Code of Mailing Address::	01454		
Correspondence Information			
Correspondence Customer Number::	001444		
Representative Information			
Representative Customer Number::	001444		
Domestic Priority Information			
Application::	Continuity Type::	Parent	Parent Filing
This Application	National Stage of	Application::	Date::
		PCT/EP03/008527	08-01-03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Germany	102 40 787.8	08-30-02	Yes

Assignment Information

Assignee Name::	OXYPHEN AG
Street of Mailing Address::	Gubelstrasse 11
City of Mailing Address::	Zug
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-6304